



## Contractor Registration Form

To be considered for inclusion in the contractor database your company is required to complete all parts of this form and submit it together with Company Profile, annual reports, brochures, Code of Conduct, Registration certificates, etc. to Logistics Department of MOEHE

GENERAL COMPANY INFORMATION	
Parent company (legal name):	
Street name and no.:	
City:	
Country:	
Phone no.:	
Email:	
Website:	
Sales Manager (name):	
Email:	
Direct phone no.:	
Director (name):	
Email:	
Direct phone no.:	
Other contact (title and name):	
Email:	
Direct phone no.:	
Year of establishment:	
Number of full time employees:	
Licensing authority:	
Licence number (VAT no./TAX id):	
Does your company have CSR related policies in place – e.g. health and safety policy, HR policy, staff policy, energy policy, climate policy or is a	



member of Global Compact? Please state which policies.	
Does your company have a Code of Conduct?	
Please state in which languages technical documents are available:	
Working language:	
List of international quality assurance certification held by your company(a copy of each certificate shall be enclosed):	
International trade/professional organisations of which your company is a member:	
Local trade/professional organisations of which your company is a member:	

SECTOR OF ACTIVITIES				
Please list your core goods/services/ works offered:				
Nature of business (tick in one box below):				
Importer:	Wholesaler:	Retailer:	Manufacturer:	Authorised agent:
Consultant:	Contractor:			

SUBSIDIARIES, ASSOCIATES AND/OR OVERSEAS REPRESENTATIVE	
Countries with registered office:	
Countries with representation (agent):	



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<p>Have you worked with other Ministries, NGOs, EU, UN or other international organisations? If yes, please enclose a list with details of contracts and customer contact information for references:</p>	
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FINANCIAL INFORMATION	
Please provide a copy of the company's most recent annual or audited financial report.	
Annual income and export sales for the last 3 years (in USD):	
Fiscal year	Income sales (USD)
2019	
2020	
2021	
Bank name:	
Bank account no.:	
Account name:	
Bank swift/BIC address:	
Street name and no.:	



City and postal code:	
Country:	

#### PAYMENT TERMS

Please state your payment terms:

Standard payment for supply, contracts is 100% payment within 30 days after completion of contractual obligations and upon receipt of contractors invoice and supporting documents.

For work and service contracts based on the contract under payment agreement.

Prepayment is in general only acceptable against a prepayment guarantee covering the full amount of the prepayment.

#### CERTIFICATION

I, the undersigned, warrant that the information provided in this form is correct and, in the event of changes, details will be provided as soon as possible.

Name:.....Title/Function:.....

Signature:.....Date:.....